

10004514

PTO/SB/06 (08-00)

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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

10004514
17-001

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (7 CFR 1.14(d))		
TOTAL CLAIMS (7 CFR 1.14(d))	30 minus 20 =	10
INDEPENDENT CLAIMS (7 CFR 1.14(d))	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT (7 CFR 1.14(d))		

RATE	FEES
	\$ 370
x \$ 9 =	90
x 42 =	84
+ =	
TOTAL	544

RATE	FEES
OR	\$ 100
OR	\$ 50
OR	\$ 25
OR	\$ 12.5
OR	\$ 6.25
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (7 CFR 1.14(d))	• 26	Minus	** 30	- 0
Independent (7 CFR 1.14(d))	• 5	Minus	*** 5	- 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (7 CFR 1.14(d))				

RATE	ADDI- TIONAL FEE
x \$ 100 =	
x 50 =	
x 25 =	
x 12.5 =	
x 6.25 =	
TOTAL	

RATE	ADDI- TIONAL FEE
OR	\$ 100
OR	\$ 50
OR	\$ 25
OR	\$ 12.5
OR	\$ 6.25
TOTAL	

1-9-22-05

(Column 1)

(Column 2)

(Column 3)

ADDITIONAL FEE

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (7 CFR 1.14(d))	• 26	Minus	** 30	- 0
Independent (7 CFR 1.14(d))	• 5	Minus	*** 5	- 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (7 CFR 1.14(d))				

RATE	ADDI- TIONAL FEE
x \$ 100 =	
x 50 =	
x 25 =	
x 12.5 =	
x 6.25 =	
TOTAL	

RATE	ADDI- TIONAL FEE
OR	\$ 100
OR	\$ 50
OR	\$ 25
OR	\$ 12.5
OR	\$ 6.25
TOTAL	

1-9-22-05

(Column 1)

(Column 2)

(Column 3)

ADDITIONAL FEE

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (7 CFR 1.14(d))	• 0	Minus	** 0	- 0
Independent (7 CFR 1.14(d))	• 0	Minus	*** 0	- 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (7 CFR 1.14(d))				

RATE	ADDI- TIONAL FEE
x \$ 100 =	
x 50 =	
x 25 =	
x 12.5 =	
x 6.25 =	
TOTAL	

RATE	ADDI- TIONAL FEE
OR	\$ 100
OR	\$ 50
OR	\$ 25
OR	\$ 12.5
OR	\$ 6.25
TOTAL	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "1".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case.
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